



Advancing DoDD 6200.3 Emergency Health Powers on Military Installations

Armed Forces Epidemiological Board

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September 20, 2005

Department of Defense Directive 6200.3

Establishes DoD policy under applicable law to protect installations and personnel in the event of a public health emergency due to Biowarfare, terrorism, or a communicable disease epidemic



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Directive 6200.3

This Directive applies to all organizational entities in DoD



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Directive 6200.3

It is DoD policy that military installations, property, personnel, or individuals visiting military installations shall be protected under applicable legal authorities against public health emergencies



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Directive 6200.3

Every installation commander shall designate a Public Health Emergency Officer (PHEO) who shall be a senior health professional affiliated with the command. The PHEO should be the Command Surgeon, local equivalent, hospital commander, or other senior leader with experience and training in functions essential to effective public health emergency management



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Directive 6200.3

Every healthcare provider shall report promptly to the appropriate PHEO any circumstance suggesting a public health emergency



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The PHEO shall

- Ascertain the existence of cases suggesting a public health emergency
- Investigate all such cases for sources of infection
- Recommend implementation of proper control measures
- Define the distribution of the illness or health condition



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Department of Defense Directive 6200.3

The PHEO may

- Share information including personally identifiable health information with Federal, State or local officials responsible for public health and safety



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Installation commanders can declare a public health emergency on one or more military installations under his/her command. Such a declaration must be reported up the chain to the proper authorities



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Directive 6200.3

During a public health emergency, the commander may exercise special powers relating to military *property*

- Collecting specimens and conducting tests
- Closing and evacuating facilities
- Using facilities, materials, and services for communication, transportation, shelter, clothing, healthcare, food, and controlling the distribution of these resources
- Controlling routes to/from the military installation(s)
- Taking measures to safely dispose of infectious waste
- Obtain and distribute needed medical supplies



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Directive 6200.3

During a public health emergency, the commander may exercise special powers relating to *persons* necessary to prevent the spread of communicable diseases

- Personnel may be ordered to submit to testing and exams necessary to diagnose and treat
- Restrictions of movement may be implemented
- Individuals may be isolated to prevent the spread of communicable disease
- Individuals may be quarantined to prevent the spread of a communicable disease



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Directive 6200.3

In the case of quarantine of individuals

- The PHEO shall coordinate with the CDC. Overseas coordination will be with appropriate host-nation public health officials
- The needs of quarantined persons will be addressed in a systematic and competent fashion
- A person subject to quarantine shall obey the rules and orders established by the PHEO



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Department of Defense Directive 6200.3 (cont'd)

- No person may enter quarantine premises without authorization
- Quarantine shall be accomplished through the least restrictive means available
- The PHEO shall provide written notice of the reason for quarantine to those subject to quarantine as soon as possible



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Directive 6200.3

- Military personnel may be ordered to submit to vaccination or treatment. Persons other than military personnel may be required to do the same in order to gain exemption or release from restrictions of movement
- Protected health information shall be used and disclosed as necessary



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Directive 6200.3

- Individuals subject to emergency health powers shall be advised that violators may be charged with a crime and subject to a fine and/or imprisonment
- For military personnel, these possible sanctions are in addition to applicable military law authorities
- In the case of persons who refuse to obey or violate this Directive, the commander of an installation can detain those not subject to military law until civil authorities can respond



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Department of Defense Directive 6200.3

- The PHEO shall maintain close contact with local and state health departments and the CDC concerning all actions taken under this Directive



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- In carrying out this Directive, PHEOs and commanders shall cooperate with law enforcement agencies investigating an actual or potential terrorist act or other crime



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Directive 6200.3

The Assistant Secretary of Defense for Health Affairs

- Shall issue necessary DoD Instructions or DoD Regulations to implement this Directive
- Shall be the principal POC for coordinating with the CDC and other civilian agencies regarding this Directive
- May grant exceptions to this Directive consistent with law



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Defense Science Board

(July 2003) Tasking to the Defense Science Board (DSB) to establish a Task Force to assess the interaction of public health and national security needs using the Severe Acute Respiratory Syndrome (SARS) epidemic and existing quarantine guidance as a specific example.



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(December 2004) Findings of the DSB Task Force on SARS Quarantine

- Current DoD policies and procedures (DoDD 6200.3) provide an adequate basis to control a significant public health event
- Recommend establishment of criteria upon which a PHEO could base advice advocating specific public health powers
- Recommend PHEOs have adequate training in disease containment response
- Recommend strengthening lines of communication between local military and civilian decision makers in surrounding communities. Recommend PHEOs to initiate such cooperative planning



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(February 2005) Tasking to the Services to Provide an Update on Implementation Status of DoDD 6200.3

Implementation areas of interest:

- The number and occupational specialty of designated PHEOs
- Percent of military installations with criteria for implementing special health power and quarantine measures
- Recommendations for training PHEOs on implementing special public health powers and quarantine measures
- Recommendations for training commanders on disease outbreak “situational awareness”
- Steps take to harmonize military installation disease containment decisions with local/state/regional civilian leaders



(August 2005) Tasking to the Services and Joint Staff to Establish a DoD Working Group to Advance DoDD 6200.3

Establish a DoD Working Group to Advance DoDD 6200.3 by:

- Identifying core competencies and training requirements for those now assigned as PHEOs
- Identifying core PHEO instructional requirements for implementation into training by the Services
- Identifying orientation requirements for non-medical personnel in command on responding to public health emergencies
- Developing criteria to be used in decision algorithms for implementing special health powers on military installations
- Developing strategies to improve lines of communication between installations and civil authorities



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Related Directives and Initiatives

- Deputy Secretary of Defense Memorandum(Sept 5, 2002) on Preparedness of U.S. Military Installations and Facilities Worldwide Against Chemical, Biological, Radiological, Nuclear, and High-Yield Explosive (CBRNE) Attack
- DoDD 2000.18 - DoD Installation CBRNE Emergency Response Guidelines
- JPM Guardian Installation Protection Program
- BioNet



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